## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required), Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification uples (see write) the mailed to the current correspondence address as included to the current correspondence address as included to the current correspondence address as included to the current correspondence address as a contract patent patent as a contract patent pat

maintenance fee notificatio	MIS.					parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note, Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
7	590 06/25/	2007	nav				
BARNES & THORNBURG Suite 900 750 17th Street, N.W. Washington, DC 20006				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmital is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
				(Depositor's name)			
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	1	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/656,253 09/08/2003			Michael J. Hawthorne ING FILES AND ANALYSIS OF TRAIN OPERATIONAL		509/35644D	8600	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE			
			L				
nonprovisional EXAMINI	NO FR	\$1400 ART UNIT	\$300 CLASS-SUBCLASS	\$0 I	\$1700	09/25/2007	
LUU, CUONG V		2128	703-008000				
1. Change of correspondence address or indication of "Fee Addres			2. For printing on the p	atent front page list			
CFR 1.53b).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address' indication (or "Fee Address" Indication form PTO/SB/12; kee 0.3-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attor listed, no name will be	he names of up to 3 registered patent attorneys genes OR, alternative genes OR, alternative genes of the property of the patent of a single firm (having as a member a text attorney or agent) and the names of up to distred platent attorneys or agents. If no name is on the printed.			
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN New York Air	an assignee is identif 137 CFR 3.11. Compl EE Brake Corpora	ied below, no assignee etion of this form is NO ation	data will appear on the part a substitute for filing an a (B) RESIDENCE: (CITY 748 Starbuck Watertown, NY	ntent. If an assignce assignment. and STATE OR CO Avenue 13601	UNTRY)	ocument has been filed for	
4a. The following fec(s) are	submitted: mall entity discount pe	4b	p. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  ☐ A check is enclosed. ☐ Payment by rectific and. Form PTO-2038 is attached. ☐ The Director is hereby authorized to change, the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number Of 2DTO (enclose an extra copy of this form).				
5. Change in Entity Status  a. Applicant claims St	MALL ENTITY status.	above) . See 37 CFR 1.27.	☐ b. Applicant is no long	er claiming SMALL	ENTITY status. Sec 37 CF	FR 1.27(g)(2).	
NOTE: The Issue Fee and Printerest as shown by the reco	ublication Fee (if requi ords of the United State	red) will not be accepted s Patent and Trademark	from anyone other than the	e applicant; a registe	red attorney or agent; or th	e assignee or other party in	
Authorized Signature	1	110			13, 2007		
Typed or printed name	n /		Registration No.				
This collection of informatio an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virginia Alexandria, Virginia 22313-	n is required by 37 CF ty is governed by 35 U plication form to the U for reducing this burd- nia 22313-1450. DO 1 1450.	R 1.311. The information I.S.C. 122 and 37 CFR 1 JSPTO. Time will vary en, should be sent to the NOT SEND FEES OR C	n is required to obtain or re 1.14. This collection is esti- depending upon the indivi- Chief Information Officer COMPLETED FORMS TO	tain a benefit by the mated to take 12 min dual case. Any comm , U.S. Patent and Tra THIS ADDRESS. S	public which is to file (and utes to complete, including nents on the amount of tin demark Office, U.S. Depa END TO: Commissioner f	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O. for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.